## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together

n applicable fee(s), to: Mail Mail Stop ISSU

Mail Stop ISS TEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885



or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A continue of mailing can only be used for domestic mailings of the		
			Fe pa	Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
30593	7590 02/21	1/2007	ha			
	CKEY & PIERC	E, P.L.C.	I h Sta ade tra	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
			Γ			(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/518,076	12/16/2004	•	Kenichi Kawano		25613-000008/US	3430
TITLE OF INVENTION:	IMAGE RECORDING	G METHOD			_	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	05/21/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS			
SHAH, MANISH S		2853	347-106000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			or agents OR, alternat  (2) the name of a sing registered attorney or	f up to 3 registered patent attorneys ternatively, a single firm (having as a member a ley or agent) and the names of up to that attorneys or agents. If no name is		
(A) NAME OF ASSIG	ess an assignee is ident in 37 CFR 3.11. Comp		data will appear on the part of the part o	patent. If an assigned assignment.		ocument has been filed for
Please check the appropria	ate assignee category or	categories (will not be pr	rinted on the patent) :	Individual 25 Cor	poration or other private gr	oup entity Government
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached. any additional.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-0750 (enclose an extra copy of this form).			
5. Change in Entity State	us (from status indicated		☐ b. Applicant is no lor	nger claiming SMALI	L ENTITY status. See 37 C	FR 1.27(g)(2).
• •	Publication Fee (if requ	úired) will not be accepte	d from anyone other than	-		e assignee or other party in
Authorized Signature				01 FC:150 Date 02 FC:A50	Mi1 4, 2007	1400.00 OP 300.00 OP
Typed or printed name		<u>Castellano</u>		Registration No		
Alexandria, Virginia 2231	3-1430.				e public which is to file (and inutes to complete, includir inments on the amount of tirrademark Office, U.S. Dep SEND TO: Commissioner splays a valid OMB control	d by the USPTO to process) ag gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,